

meritorious contribution in *Internal Medicine* and sciences contributing thereto, under the following conditions:

1. The contribution must be submitted in the form of a thesis or dissertation based upon published or unpublished original work.

2. It must be mailed to the Executive Secretary of the American College of Physicians, E. R. Loveland, 133-135 S. Thirty-sixth Street, Philadelphia, Pa., on or before August 31, 1930.

3. The thesis or dissertation must be in the English language, in triplicate, in typewritten or printed form, and the work upon which it is based must have been done in whole or in part in the United States or Canada.

4. The recipient of the prize would be expected to read the essay at the next Annual Meeting of the College, after which he would be officially presented with the prize by the President.

5. The College reserves the right to make no award of the prize if a sufficiently meritorious piece of work has not been received.

6. The announcement of the prize winner will be made not later than two months before the Annual Meeting.

MEDICAL ECONOMICS

At the Del Monte session of the California Medical Association (April 28-May 1, 1930) the Council of the California Medical Association recommended to the House of Delegates that the California delegates to the Detroit session of the American Medical Association (June 23-27, 1930) be instructed to present resolutions and proposed amendments to the By-laws of the American Medical Association in favor of and for an American Medical Association "Council of Medical Economics."

At the meeting of the Executive Committee held on May 17, the president-elect of the California Medical Association, Dr. Junius B. Harris of Sacramento, who is one of the California Medical Association delegates, was instructed, with his fellow delegates, to sponsor these resolutions and amendments.

Reference thereto is made in one of the editorials in this issue, and also in the minutes of the California Medical Association Council and of the House of Delegates, which are printed in the California Medical Association column. For the information of members, the resolutions and proposed amendments are as follows.

* * *

Whereas, The proper solution of problems in Medical Economics is one of major importance if modern day standards of medical practice and public health are to be properly maintained and safeguarded; now therefore be it

Resolved, By the House of Delegates of the California Medical Association that its delegates to the 1930 annual meeting of the American Medical Association be instructed to request the consideration by the House of Delegates of the American Medical Association of the desirability of forming a Council on Medical Economics of the American Medical Association; and be it further

Resolved, That the House of Delegates of the American Medical Association be informed that the House of Delegates of the California Medical Association recommends the formation of such a Council by the American Medical Association.

* * *

Whereas, The members of the House of Delegates of the California Medical Association at the 1930 Del Monte annual session unanimously voted that the California Medical Association delegates "to the American Medical Association be instructed to attempt to secure the formation of a Council on Medical Economics of the American Medical Association"; now therefore be it

Resolved, By the Executive Committee of the California Medical Association in pursuance of the

said instructions from the California House of Delegates that there be submitted to the House of Delegates of the American Medical Association the attached proposed amendments to the By-laws of the American Medical Association; and be it further

Resolved, By the California Medical Association delegates be instructed to use their best endeavors to secure the approval of the House of Delegates of the American Medical Association to the end that an amendment to the By-laws of the American Medical Association may be adopted which would provide for a Council on Medical Economics.

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Proposed Amendments to the By-Laws of the American Medical Association

Submitted by the California Medical Association through its own House of Delegates and its delegates to the American Medical Association.

* *

Amendment to Chapter VII.—Committees:
Sec. 3. to be amended by the addition beneath the words:

(c) "Council on Scientific Assembly."

of the clause

(d) "Council on Medical Economics."

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CHAPTER VIII. ORGANIZATION OF STANDING COMMITTEES OR COUNCILS

To be amended by the addition of the words "The Council on Medical Economics shall consist of seven members, each elected for seven years." This sentence to be inserted in Sec. 1. immediately after the sentence which reads: "The Council on Medical Education and Hospitals shall consist of seven members, each elected for seven years."

Sec. 2. Officers. To be amended by the addition after the phrase "The Board of Trustees shall elect annually, to serve one year, a secretary of the Council on Medical Education and Hospitals" of the words "and a secretary of the Council on Medical Economics, and shall fix their salaries."

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CHAPTER IX. DUTIES OF STANDING COMMITTEES OR COUNCILS

To be amended by the addition of a new Sec. 4. to read:

Sec. 4. Council on Medical Economics. The functions of the Council on Medical Economics shall be: (1) To investigate conditions of medical economics and to suggest means and methods by which the same may be improved. (2) To endeavor to further the realization of such suggestions as may be approved by the House of Delegates.

TWENTY-FIVE YEARS AGO *

EXCERPTS FROM OUR STATE MEDICAL JOURNAL

Vol. III, No. 6, June 1905

From some editorial notes:

... *Wasting Material.*—Doctor Osler, at a farewell dinner given him by some five hundred physicians of this country and Canada on May 2, called attention to a general condition which has been pointed out, so far as its local application to San Francisco is concerned, in the pages of the journal. He referred to the tremendous waste of clinical material in this country. . . .

... *Honest Medicines.*—Sufficient time has now elapsed to permit one to judge of the reception by the medical press of this country of the Council on Pharmacy and Chemistry of the American Medical Association. Remember, this Council stands for the principle that *secrecy has no place in legitimate, decent,*

* This column strives to mirror the work and aims of colleagues who bore the brunt of state society work some twenty-five years ago. It is hoped that such presentation will be of interest to both old and recent members.

professional medicine. . . . The "root of the proprietary principle" is composed of two branches, secrecy and fraud. Should it not be struck at, and hard? . . .

From an article on "Medical Inspection of Schools" by Edward Von Adelung, M. D., Oakland:

. . . An efficient system can be found in Egypt which dates back twenty-two years, in Belgium for over twenty-six years, in France for twenty years. It has been in vogue for a long time in Switzerland, England, Germany, Russia, and Scotland. It was inaugurated in Japan in 1893. In the United States it was first adopted in Boston in 1894 and Brookline soon followed Boston's example. . . .

From "Reports Presented at the Thirty-Fifth Annual Meeting of the California State Medical Society":

Report of the Editor and the Publication Committee.— . . . In view of these facts, it is a pleasure to report to you that the just criticisms which have been voiced in the pages of your journal have been very largely instrumental in the organization, by the trustees of the American Medical Association, of a "Council on Pharmacy and Chemistry." . . .

. . . We consider the stimulation of county societies the most important function of your journal. . . .

Report of the Council.— . . . Two publications of this society, the *Journal* and the *Register*, speak for themselves. The stand taken by our journal in the interests of legitimate and standard pharmaceutical preparations has made it unique in journalism in the United States. This work has been ably conducted by the editor, with the assistance of the Publication Committee, and has had a tendency to bring about great and lasting results. . . .

. . . During the session of the legislature the secretary mailed to each officer of the state society and to the president and secretary of every component society, from time to time, a circular letter giving, briefly, information relative to measures pending before the legislature. . . .

. . . Santa Clara County Society has made formal request that your honorable body rule upon the eligibility of homeopathic or eclectic physicians who may be members of homeopathic or eclectic medical societies to become members of component societies of the Medical Society of the State of California. . . .

Membership in 1905 and 1906:

	Last Year	This Year	Gain	Loss
Alameda County.....	113	125	12
Los Angeles County.....	278	315	37
Sacramento County.....	45	48	3
San Francisco County.....	464	521	57

An excerpt from the "California Medical and Surgical Reporter," entitled "Some Personal Impressions":

There was an excellent opportunity to study some strong medical personalities at the Riverside meeting of the Medical Society of the State of California (California Medical Association):

President Adams, frank, open-faced and genial, even when corrected on points of law by his right bower, the state secretary; Dr. Philip Mills Jones, a paradox of alertness in a somewhat attenuated and languid physical frame who, like President Adams, was genial even in his positive interpretations of the Constitution and By-Laws of the society; Dr. Dudley Tait, polished expounder of the state medical laws, a popular-unpopular member, whose comings and goings were of interest to all; Dr. Rooney, president-elect for 1906, pleasant in manner and feature, and raconteur of an inexhaustible fund of stories; Dr. Norman Bridge, like Dr. Tait, positive and outspoken in his conceptions of things; Dr. H. Bert. Ellis, leisurely alert and smilingly aggressive; Dr. Walter Lindley, moving here and there, but leaving, no doubt, the impress of his presence; the venerable Dr. Orme, a faithful member and officer of the state society through many past years; and so on through a whole host of workers in our noble guild, to mention all of whom with proper words would require much more space than is at our disposal.

DEPARTMENT OF PUBLIC HEALTH

By W. M. DICKIE, Director

*** Prevalence of Trichinosis Is Exceptional.**—The past five months have brought to California a larger number of cases of trichinosis than have ever occurred within the state during a like period of time. A total of 132 cases were reported during the period December 1, 1929, to April 5, 1930. During the calendar year 1929, there were but thirty-three cases of trichinosis reported, and during the first fourteen weeks of this year, 105 cases have been reported.

While it is true that most cases, this season, found their sources of infection in sausages, both home-made and commercially prepared, a considerable number of cases were traced to the use of pork meat which was improperly cooked. No less than twenty-one of the 132 cases that have been reported during the past winter season, were due to the use of undercooked pork meat. A very few cases were due to the use of commercially packed sausages, which were not thoroughly cooked before eating, and most of them were due to the use of home-prepared salami, mettwurst and to other types of sausages which were not thoroughly cooked before being eaten. Complete death records are not available at this time, but, in so far as they are available, it would appear there have been two deaths from trichinosis in Trinity County, one in San Francisco and five in El Dorado County. The group of cases which occurred in Trinity County are particularly interesting for the reason that they were due to the use of smoked bear meat. This is the first instance on record in which infected bear meat has caused trichinosis in California.

It is the consensus of opinion among public health authorities that no method of inspection has yet been devised by which the presence or absence of trichinae in pork can be determined with certainty. There is but one way to absolutely avoid the contraction of trichinosis and that is to cook all pork products to a temperature of 160 degrees Fahrenheit before serving. Fresh pork should be cooked until it becomes entirely white and there is no longer any red color left. Pickled pork, smoked pork and similar methods of curing pork products may render them safe in so far as trichinosis is concerned, but since the thoroughness of the curing process is not always a certainty, it is safer to thoroughly cook all pork meat, at all times, before eating it.

At the meeting of the State Board of Public Health held in San Francisco, April 12, 1930, trichinosis was made a reportable disease. The attention of health officers is drawn to this fact. All practitioners of medicine should be advised of this fact, in order that cases of trichinosis, or cases which may be suspected as cases of trichinosis, may be reported properly.

Many Deaths from Heart Disease.—Diseases of the heart and circulatory system caused 23.9 per cent of all deaths in California last year. In 1920, diseases of the heart and circulatory system caused 17 per cent of all deaths in California. There were 8013 deaths from this cause out of a total of 47,124 deaths from all causes in the year 1920. In 1929, there were 15,620 deaths from heart disease out of a total of 65,363 deaths from all causes. The increase in the numbers and percentages of deaths from heart disease in California during the past ten years has been gradual, but persistent. The increase, however, casts no reflection upon the health resources of California, particularly when it is noted that more than 60 per cent of all deaths from heart disease in this state last year were in persons more than 65 years of age, and almost 20 per cent of such deaths were in persons who were between 55 and 64 years of age. Men must, of necessity, die of some condition.